

Doc#: 2119604115 Fee: \$98.00  
 Karen A. Yarbrough  
 Cook County Clerk  
 Date: 07/15/2021 07:02 AM Pg: 1 of 3

**UCC FINANCING STATEMENT**  
 FOLLOW INSTRUCTIONS

**A. NAME & PHONE OF CONTACT AT FILER (optional)**

**B. E-MAIL CONTACT AT FILER (optional)**

**C. SEND ACKNOWLEDGMENT TO: (Name and Address)**

Record and Return To:  
 ServiceLink  
 1355 Cherrington Parkway  
 Moon Township, PA 15108

29189429

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. **DEBTOR'S NAME:** Provide only one Debtor name (1a or 1b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name), if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here  and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

|                          |                          |                     |                               |             |
|--------------------------|--------------------------|---------------------|-------------------------------|-------------|
| 1a. ORGANIZATION'S NAME  |                          |                     |                               |             |
| OR                       | 1b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX      |
|                          | SIBUL                    | MARK                |                               |             |
| 1c. MAILING ADDRESS      |                          | CITY                | STATE                         | POSTAL CODE |
| 1335 N Astor St, Unit#5C |                          | Chicago             | IL                            | 60610       |
|                          |                          |                     |                               | COUNTRY     |
|                          |                          |                     |                               | USA         |

2. **DEBTOR'S NAME:** Provide only one Debtor name (2a or 2b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name), if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here  and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

|                          |                          |                     |                               |             |
|--------------------------|--------------------------|---------------------|-------------------------------|-------------|
| 2a. ORGANIZATION'S NAME  |                          |                     |                               |             |
| OR                       | 2b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX      |
|                          | REMEN                    | SHELLY              |                               |             |
| 2c. MAILING ADDRESS      |                          | CITY                | STATE                         | POSTAL CODE |
| 1335 N Astor St, Unit#5C |                          | Chicago             | IL                            | 60610       |
|                          |                          |                     |                               | COUNTRY     |
|                          |                          |                     |                               | USA         |

3. **SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY).** Provide only one Secured Party name (3a or 3b)

|                         |                          |                     |                               |             |
|-------------------------|--------------------------|---------------------|-------------------------------|-------------|
| 3a. ORGANIZATION'S NAME |                          |                     |                               |             |
| Citibank, N.A.          |                          |                     |                               |             |
| OR                      | 3b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX      |
|                         |                          |                     |                               |             |
| 3c. MAILING ADDRESS     |                          | CITY                | STATE                         | POSTAL CODE |
| 1000 Technology Drive   |                          | O'Fallon            | MO                            | 63368-2240  |
|                         |                          |                     |                               | COUNTRY     |
|                         |                          |                     |                               | USA         |

4. **COLLATERAL:** This financing statement covers the following collateral:

"The Cooperative Interest(s) associated with the Cooperative Unit(s) known as No(s) 5C, and known as and by the address 1335 N Astor St, Chicago, IL 60610. The Debtor's (Debtors') interest in the shares of stock issued by the Cooperative Corporation (Coop Corp. Name: 1335 Astor Cooperative Building, Inc.) allocated to the Cooperative Unit(s) plus the proprietary lease(s) or occupancy agreement(s) for said unit(s) and any replacements and additional stock, and any proprietary lease or occupancy agreement amendments, replacements, extensions or renewals. The Debtor's (Debtors') right, title and interest in and to all dwellings, buildings, parking spaces, storage spaces, and other structures inclusive of all fixtures and appurtenances, erected now or in the future, on or in the Cooperative Unit(s), Site, Plot, Lot or Land known as and by the related street address, inclusive of all replacements and additions. All proceeds of the conversion, voluntary or involuntary, of any of the foregoing into cash or liquid claims, including, without limitation, proceeds of insurance and condemnation awards and any unearned premiums accrued, accruing or to accrue under any and all insurance policies now or hereafter obtained by the Debtor(s)."

5. Check only if applicable and check only one box: Collateral is  held in a Trust (see UCC1Ad, item 17 and Instructions)  being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box:  
 Public-Finance Transaction  Manufactured-Home Transaction  A Debtor is a Transmitting Utility

6b. Check only if applicable and check only one box:  
 Agricultural Lien  Non-UCC Filing

7. **ALTERNATIVE DESIGNATION (if applicable):**  Lessee/Lessor  Consignee/Consignor  Seller/Buyer  Bailee/Bailor  Licensee/Licenser

8. **OPTIONAL FILER REFERENCE DATA:**  
 Mortgage Rep: Denise Heldman NMLS# 727020 Lender Name: Citibank N.A., NLMS # 412915, Loan # 004779097353

# UNOFFICIAL COPY

## UCC FINANCING STATEMENT ADDENDUM

### FOLLOW INSTRUCTIONS

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because individual Debtor name did not fit, check here

9a. ORGANIZATION'S NAME

OR 9b. INDIVIDUAL'S SURNAME

**SIBUL**

FIRST PERSONAL NAME

**MARK**

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

10. DEBTOR'S NAME Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c

10a. ORGANIZATION'S NAME

OR 10b. INDIVIDUAL'S SURNAME

**REMEN**

INDIVIDUAL'S FIRST PERSONAL NAME

**SHELLY**

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

**RACHEL**

SUFFIX

10c. MAILING ADDRESS

**1335 N Astor St, Unit#5C**

CITY

**Chicago**

STATE

**IL**

POSTAL CODE

**60610**

COUNTRY

**USA**

11.  ADDITIONAL SECURED PARTY'S NAME of  ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. ORGANIZATION'S NAME

OR 11b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

11c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

**Loan # 004779097353**

13.  This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS (if applicable)

14. This FINANCING STATEMENT:

covers timber to be cut

covers as-extracted collateral

is filed as a fixture filing

15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):

16. Description of real estate:

**See Schedule /Exhibit A**

17. MISCELLANEOUS:

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Loan # : 004779097353

## Exhibit A

### LEGAL DESCRIPTION

The following described property:

Situated in the City of Chicago, County of Cook, State of Illinois:

209 shares of capital stock of 1335 Astor Cooperative Building, Inc. (the "Shares") allocated to Apartment 5C (the "Apartment") in the building known as 1335 North Astor Street, Chicago, IL 60610.

APN: 17-03-105-009, 17-03-105-010, 17-03-105-011, 17-03-105-012 and 17-03-105-013

Assessor's Parcel No: 17-03-105-009

Property of Cook County Clerk's Office